FEC FORM 2 (REV. 02/2009)

14020734891

FEC FORM 2 STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

14 OCT -2 AM 10: 34

				14001 E AII	
(a) Name of Candidate (in full)					
Ms. Shelley Moore Capito					
(b) Address (number and street) 2 Comstock Pl	,		Candidate's FEC Identification Number S4WV00159		
(c) City, State, and ZIP Code	City. State, and ZIP Code				Amended
Charleston	W	25314	ļ	Statement (N) OR X	(A)
4. Party Affiliation	5. Office Sought		6. State & Dis	trict of Candidate	
REPUBLICAN PARTY	Senate		W		
DE	SIGNATION OF PRI	NCIPAL	CAMPAIG	N COMMITTEE	
7. I hereby designate the following na	•	•	, ,	mittee for the 2014 election(s). (year of election)	
NOTE: This designation should be	iled with the appropriate office	e listed in th	e instructions.		
(a) Name of Committee (in full)					
Capito For West Vir	ginia				
(b) Address (number and street) P.O. Box 11519					
(c) City, State, and ZIP Code					
Charleston			w	25339	
candidacy.				mmittee, to receive and expend funds on beh	alt of my
NOTE: This designation should be	iled with the principal campaig	gn committe	e.		
(a) Name of Committee (in full)				· · · · · · · · · · · · · · · · · · ·	
Capito Victory Com	mittee				
(b) Address (number and street) 228 S Washington St					
Ste 115					
(c) City, State, and ZIP Code					
Alexandria			VA	22314	
I certify that I have exa	mined this Statement and to I	the best of r	ny knowledge i	and belief it is true, correct and complete.	
Signature of Candidate				Date	
Ms. Shelley Moore Capito Shell	cy Mone Cap	150		09/25/2014	
			ne person signi	ng this Statement to penalties of 2 U.S.C. §4	37g.
	j				

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 2 /
	OF OTHER AUTHORIZED COMMITTEES uding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NC candidacy.	OT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with the princ	cipal campaign committee.	
(a) Name of Committee (in full)		
Fiscal Conservative Majority Fur	nd	
(b) Address (number and street) 228 S Washington St Ste 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314	
	OF OTHER AUTHORIZED COMMITTEES uding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NC candidacy.	OT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE: This designation should be filed with the prince	cipal campaign committee.	
(a) Name of Committee (in full)		
2014 Senators Classic Committee	ee	
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314	
	OF OTHER AUTHORIZED COMMITTEES uding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NO candidacy.	OT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE: This designation should be filed with the prince	cipal campaign committee.	
(a) Name of Committee (in full)		
Scott Capito Rounds Victory Fu	nd	
(b) Address (number and street) 901 N Washington St Ste 700		
(c) City, State and ZIP Code		
(b) Oity, otate and 211 oode		

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 3 /
DESIGN	IATION OF OTHER AUTHORIZED COMMIT	TEES [ADDITIONAL]
Lhereby authorize the following named committee candidacy.	e, which is NOT my principal campaign committee, to receive and	expend funds on behalf of my
NOTE:This designation should be filed v	vith the principal campaign committee.	
(a) Name of Committee (in full) Founders Senate Candi	date Committee	
(b) Address (number and street) 288 S Washington St Ste 115		
(c) City, State and ZIP Code		
Alexandria	VA 2231	14
DESIG	NATION OF OTHER AUTHORIZED COMMIT (Including Joint Fundraising Representatives)	TEES [ADDITIONAL]
I hereby authorize the following named committee	e, which is NOT my principal campaign committee, to receive and	d expend funds on behalf of my
candidacy.		
candidacy. NOTE:This designation should be filed to	with the principal campaign committee.	
•	with the principal campaign committee.	
NOTE:This designation should be filed to		
NOTE:This designation should be filed to (a) Name of Committee (in full)		
(a) Name of Committee (in full) Winning Women for the (b) Address (number and street) 228 S Washington St		
(a) Name of Committee (in full) Winning Women for the (b) Address (number and street) 228 S Washington St Ste 115		
(a) Name of Committee (in full) Winning Women for the (b) Address (number and street) 228 S Washington St Ste 115 (c) City, State and ZIP Code Alexandria	US Senate	LADDITIONAL
(a) Name of Committee (in full) Winning Women for the (b) Address (number and street) 228 S Washington St Ste 115 (c) City, State and ZIP Code Alexandria	US Senate VA 2231 NATION OF OTHER AUTHORIZED COMMIT	TEES [ADDITIONAL]
(a) Name of Committee (in full) Winning Women for the (b) Address (number and street) 228 S Washington St Ste 115 (c) City, State and ZIP Code Alexandria DESIGN	VA 2231 NATION OF OTHER AUTHORIZED COMMIT (Including Joint Fundraising Representatives) e. which is NOT my principal campaign committee, to receive and	TEES [ADDITIONAL]
(a) Name of Committee (in full) Winning Women for the (b) Address (number and street) 228 S Washington St Ste 115 (c) City, State and ZIP Code Alexandria DESIGN I hereby authorize the following named committee candidacy.	VA 2231 NATION OF OTHER AUTHORIZED COMMIT (Including Joint Fundraising Representatives) e. which is NOT my principal campaign committee, to receive and	TEES [ADDITIONAL]
(a) Name of Committee (in full) Winning Women for the (b) Address (number and street) 228 S Washington St Ste 115 (c) City, State and ZIP Code Alexandria DESIGN I hereby authorize the following named committee candidacy. NOTE:This designation should be filed to	VA 2231 NATION OF OTHER AUTHORIZED COMMIT (Including Joint Fundraising Representatives) e, which is NOT my principal campaign committee, to receive and with the principal campaign committee.	TEES [ADDITIONAL]
(a) Name of Committee (in full) Winning Women for the (b) Address (number and street) 228 S Washington St Ste 115 (c) City, State and ZIP Code Alexandria DESIGN I hereby authorize the following named committee candidacy. NOTE:This designation should be filed to the committee (in full)	VA 2231 NATION OF OTHER AUTHORIZED COMMIT (Including Joint Fundraising Representatives) e, which is NOT my principal campaign committee, to receive and with the principal campaign committee.	TEES [ADDITIONAL]
(a) Name of Committee (in full) Winning Women for the (b) Address (number and street) 228 S Washington St Ste 115 (c) City, State and ZIP Code Alexandria DESIGN I hereby authorize the following named committee candidacy. NOTE:This designation should be filed to the committee of the commit	VA 2231 NATION OF OTHER AUTHORIZED COMMIT (Including Joint Fundraising Representatives) e, which is NOT my principal campaign committee, to receive and with the principal campaign committee.	TEES [ADDITIONAL]

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003) Page [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) Six in '14 Fund (b) Address (number and street) 228 S Washington St Ste 115 (c) City, State and ZIP Code Alexandria VA 22314 [ADDITIONAL] DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code

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DANA K. MCCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-7116 PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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REPARER_DH DATE PREPARED_10-2-14



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